

ANNUAL REPORT

UPON THE

HEALTH OF DEWSBURY

FOR THE YEAR 1908.

BY T. O. HALLIWELL, D.P.H.

Medical Officer of Bealth.

DEWSBURY:

JOSEPH WARD AND CO., PRINTERS, CAXTON SQUARE, CHURCH STREET.



To the Chairman and Members of the Sanitary Committee of the Dewsbury Town Council.

GENTLEMEN,

I have the honour to present to you the Annual Report upon the vital statistics and sanitary progress of the Borough during the year 1908.

The birth rate shows a slight increase as compared with 1907, though it is still low.

The death rate is also slightly higher than that of the previous year though that of the rest of the country has declined somewhat.

There has been an increase in our infantile death rate, and also in that of the rest of the country.

There has been a most satisfactory decline in the total number of infectious diseases. The number being the lowest for nineteen years with the exception of the year 1895, when there were two less.

I cannot say that the voluntary notification of Consumption has been a success.

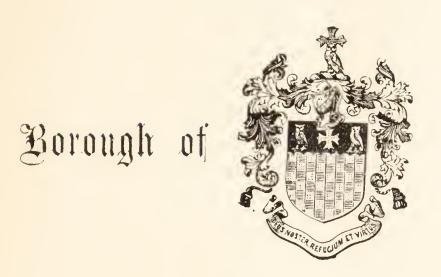
Medical inspection of school children, and matters relating thereto, are dealt with fully in a special report to the Education Committee and therefore not as here-to-fore reported on in this Annual Report.

I am, Gentlemen,

Your obedient Servant,

T. O. HALLIWELL.

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Dewsburg.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1908.

STATISTICAL SUMMARY, 1908.

Estimated mean population	• • •		26,987
Area in acres (excluding inland water)	• • •		1,435
Birth rate per 1,000 living	• • •	• • •	21.93
Net death rate at all ages per 1,000 living	• • •		19
Infantile mortality per 1,000 births	• • •	• • •	165
Death rate per 1,000 living from the seven	principal z	ymotie	
diseases	•••	• • •	1.8
Excess of registered births over net deaths	• • •		79

THE MUNICIPAL BOROUGH OF DEWSBURY is co-extensive with the Civil Parish of Dewsbury, and forms a Sub-Registration District of Dewsbury (No. 6) of the Registration District of Dewsbury (No. 502). It is divided into three Wards—All Saints', St. John, and Trinity.

Name and Number of Registration District.	Name and Number of Registration Sub-District.	Civil Parish.	Wards.
Dewsbury 502	Dewsbury M.B. 502, 6	Dewsbury	All Saints' St. John Trinity

THE AREA OF THE BOROUGH.—The area of the Borough is 1471 statute acres, including land and inland water; the area of land alone is 1435 statute acres.

*	Area in Sta		
	Land and Inland Water.	Inland Water only.	Land only.
Dewsbury M.B	1471	36	1435

THE POPULATION OF THE BOROUGH.—The following Table is taken from the Census Report (1901) of the Registrar General:—

Dewsbury M.B.—Number of persons, males and females, enumerated at the censuses of 1891 and 1901.

Census Year.	Persons.	Males.	Females.
1891	29,847	14,076	15,771
1901	28,060	13,090	14,970

On the assumption that the population of Dewsbury is still decreasing at the same rate that it did between the census years 1891 and 1901, the estimated corrected population at the end of

the June quarter, 1908, was 26,987 persons—12,516 males and 14,471 females. This, *i.e.*, the population at the middle of the year, is that upon which the various rates must be calculated.

Seeing that the number of births exceeded the number of deaths, the natural inference would be that the population had increased during the year, but as the last census, taken in 1901, showed a decrease as compared with census taken in 1891, for statistical purposes it is assumed that decrease is still going on. This can only be proved at the next census. The decrease, if correct, would be accounted for by emigration, which is taking place. I know of many families who now live in adjoining districts who formerly lived in Dewsbury. Their work, however, is still in Dewsbury.

The difficulty cannot be got over, and it is a great argument in favour of quinquennial censuses, which, it is generally recognised by Medical Officers of Health, ought to be taken.

DENSITY OF POPULATION.—The population as enumerated at the census of 1901 being 28,060 persons, the density of population was 19:55 persons per acre, exclusive of area covered by water at the time of the last census. The density at the middle of 1908 would be 18:8 persons per acre.

The number of persons per inhabited house was 4.2 at the census of 1901.

BIRTHS.— The total number of births registered in the Borough in 1908 was 592, of whom 300 were males and 292 females, so that for each 100 males born there were 97:3 females born.

Dewsbury M.B.—The number of births in 1901, 1902, 1903, 1904, 1905, 1906, 1907, and 1908, and the average for 1891-1900.

	Number of Births.											
	Average 10 years. 1891-1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.			
Dewsbury M.B	761	689	635	660	671	653	639	592	592			

THE BIRTH RATE.—In 1908 the birth rate was equivalent to 21.93 per 1,000 living.

The following Table shews the birth rate in England and Wales and in Dewsbury for the past few years:—

		Birth Rate per 1,000 of Population.										
	Average, 10 years, 1891–1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.			
England and												
Wales	29.9	28.5	28.6	28.4	27.9	27.2	27.0	26:3*	26.5			
76 Great Towns					29.1	28.2	27.9	27.0	27.0			
142 Smaller												
Towns	• • •				27.5	26.9(a)	26.5	25.7	26.0			
England and												
Wales, less					00.0	00 0 (1)	00.0	25.0	20.0			
the 218 towns	00.00	04.6	20.0	00.0	26.8	26.3(b)	26.3	25.6	26.2			
Dewsbury	26.26	24.6	22.8	23.8	24.39	23.89	23.44	21.83	21.93			
V					1							

^{*} This is the lowest on record.

From the above Table it will be seen that there has been a very slight increase in the birth rate in Dewsbury, and also in England and Wales taken as a whole. Our slight rise in the birth rate is owing to the fact that all rates are calculated on a supposed annual decrease in population. You will have observed that the number of births in 1908 was exactly the same as in 1907.

The natural increase of the population is the excess of births over the net deaths, which is shown in the following Table for the past 14 years:—

Year.	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908
Natural Increase.	217	128	193	131	156	101	127	131	133	101	131	142	100	79

ILLEGITIMATE BIRTHS.—There were 50 illegitimate births during the year, being 84·4 per 1,000 of the total births (average 1891-1900 England and Wales 42 per 1,000 births). Ten of the

⁽a) 141 smaller towns.

⁽b) Less the 217 towns.

50 births were children of mothers who came into Dewsbury for their confinements, but were not boná-fide residents of Dewsbury.

In 1903 the ratio in Dewsbury was 62·12 per 1,000 births; in 1904 64·08 per 1,000 births; in 1905 78·1 per 1,000 births; in 1906 54·77 per 1,000 births; and in 1907 89·5 per 1,000 births.

DEATHS.—The total number of deaths registered in the district in 1908 was 595—303 males and 292 females. To arrive at the true death rate of the Borough, the number of deaths of Dewsbury "residents" occurring outside the district must be added, and the number of deaths of "non-residents" occurring in the Borough must be subtracted.

Dewsbury M.B. Calculation of the net total deaths belonging to the district, 1908:—

	Persons.	Males.	Females.
Total deaths registered in the district in 1908 Add: Deaths of "residents" of Dewsbury	595	303	292
occurring in Public Institutions outside the district	20	9	11
	615	312	303
Subtract deaths of "non-residents" occurring in Public Institutions within the district	100	59	41
Also "non-resident" dying in the district but not in a Public Institution	2	2	• • •
Net total deaths belonging to the district	513	251	262

The net number of deaths belonging to the district is therefore reduced to 513—251 males and 262 females—and these deaths were distributed throughout the year as follows:—

Dewsbury M.B. The number of deaths and the percentage of total deaths occurring during each month and each quarter of 1908.

1908.	Persons.	Males.	Females.	Percentage of Total Deaths. Persons.	Persons.	Males.	Females.	Percentage of Total Deaths. Persons.
		j					1	
January	. 54	34	20	10.52				
February	~-	23	$\frac{1}{28}$	9.94				
March	~0	28	30	11.3				
1st Quarter					163	85	78	31.77
iso descer				• • • • • • • • • • • • • • • • • • • •	100	0.9	• •	91 11
April	. 43	22	21	8:38		1		
May	0.4	11	$\frac{23}{23}$	6.62				
June	0.4	16	18	6.62				
2nd Quarter		1.0		•••	111	49	62	21.63
Zina quartor				• • •	111	3.47		21.09
July	. 29	15	14	5.67				
August	17	20	$\overline{21}$	7.99				
September	4.0	$\begin{vmatrix} 25 \end{vmatrix}$	$\frac{24}{24}$	9.55				
3rd Quarter	10				119	60	59	23.19
ora guarter		•••	• • •	• • •	110	00	90	20 10
October	. 37	18	19	7.21				
November		$\frac{10}{21}$	24	8.77				
December		18	$\frac{21}{20}$	7.4				
4th Quarter				•	120	57	63	23:39
Ton Quarter	•			• • •	120	01		£13 1311
Total 1908	513	251	262		513	251	262	
100011000	010				010	AND L		• • •

DEATH RATE.—The mean population for the year being estimated to have been 26,987 persons—12,516 males and 14,471 females, and the net total deaths from all causes belonging to the district being 513—251 males and 243 females—the general death rate for the year was 19 per 1,000 living; for males a rate of 20.05 per 1,000 living, and for females a rate of 16.79 per 1,000 living.

For the purpose of comparison the following Table is given:—

		Annual Death Rate per 1,000 living from all causes.										
	Average, 10 years, 1891-1900.	1901.	1902.	1908.	1904.	1905.	1906.	1907.	1908.			
England and												
Wales	18.2	16.9	16.2	15.4	16.2	15.2	15.4	15.9	14.7a			
76 Great			10.5	17.0	17.0	1 5 .7	16.0	15.4	14.0			
Towns 142 Smaller		• • •	18.5	17.3	17.2	15.7	16.0	15.4	14.9			
Towns					15.6	14.4*	14.4	14.5	14.0			
England and												
Wales, less the 218												
Towns					15.3	14.9†	15.0	14.7	14.7			
Dewsbury	21.20	20.1	10.1	10.0	20.72	10.00	10.00	10.14	10.0			
M.B	21.29	20.1	18.1	19.0	20.72	19.09	18.29	18.14	19.0			

*141 smaller towns.

(α) Lowest ever recorded.† England and Wales, less the 217 towns.

The following Table shows the age periods of deaths, month by month, of all Dewsbury residents, including those who have died in Public Institutions outside the Borough:—

					8-				
Month.	0—1 year.	1-2	2—3	3-4 4-5	Total under 5 years.	5—10	10—15	15—20	20-25
January February March April May June July August September October November December	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	M. F. 3 0 2 1 2 1 3 1 2 4 1 1 2 2 2 2 0 2 1	M. F 1 1 1 1 1 3 1 1	M. F. M. I 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1	11 1 9 3 7 8 7 4 1 1 5 1 5 5 6 3 6 13 10 12 1 9 7 4 5	M. F. 2 2 1 1 1 1 2 1 1 1 1	M. F 1 1 1 2 2 1	M. F. 1 2 1 1 1 1 1 2 2 1 1 2 1 2 1	M. F. 2 1 1 1 1 1 1 1 1 2 2 1 2
	56 42	14 16	5 5	6 5 3	3 84 71	3 9	4 7	9 8	7 9
Month.	25—35	35—45	45—55	55-65 65-75	Over 75 years.	Total 5—75		tal at ages.	Total.
January February	M. F. 3 1 1 3	м. F. 1 3 2 1	м. F. 5 3 1 1	м. г. м. г. 4 2 6 5 6 5 1 8	$\left \begin{array}{cc}1&1\\2&3\end{array}\right $	м. г. 23 19 14 25	M. 34 23	F. 20 28	54 51

Month.	25—35	35—45	45—55	5565	65—75	Over 75 years.	Total 5—75	Total at all ages.	Total.
January February March April May June July August September October November December	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	м. F. 1 3 2 1 3 2 1 2 1 2 1 2 1 4 2 1 1 20 13	M. F. 5 3 1 1 3 2 1 4 3 6 1 6 1 2 1 2 1 3 2 1 2 1 2 2 1 3 2 1	M. F. 4 2 6 5 2 5 2 3 1 5 4 1 3 2 1 3 3 1 7 1 1 1 3 6 29	M. F. 6 5 1 8 6 5 4 3 3 1 2 2 5 3 2 5 4 4 1 6 35 46	M. F. 1 1 2 3 2 3 3 5 3 1 1 2 1 2 1 2 1 2	M. F. 23 19 14 25 21 22 15 17 10 18 11 13 9 11 14 8 15 12 9 12 17 19 9 15	M. F. 34 20 23 28 28 30 22 21 11 23 16 18 15 14 20 21 25 24 18 19 21 24 18 20 25 24 18 20 25 24 18 20 25 24 18 20 25 24 18 20 25 25 25 25 25 25 25 25 25 25 25 25 25	54 51 58 43 34 34 29 41 49 37 45 38

INFANTILE MORTALITY.—In 1908 the number of deaths amongst infants in Dewsbury was 98, which is equal to an infantile mortality of 165 per 1,000 births.

The following Table shows the infantile mortality in Dewsbury and other parts of the country for the past seven years:—

Number of Deaths under one year of age to 1,000 Births.	1					т	•			
England and Wales 154 151 133 132 146 128 133 118 121 West Riding 164 168 145 160 140 146 127 128 142 Smaller Towns 144 154 132* 138 122 124 England and]	Number	of Deatl	ns under	one yea	r of age t	to 1,000	Births.	
Wales 154 151 133 132 146 128 133 118 121 West Riding 164 168 140 140 146 127 128 142 Smaller 144 154 132* 138 122 124 England and 144 154 132* 138 122 124		Average, 10yea rs, 1891-1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.
Wales 154 151 133 132 146 128 133 118 121 West Riding 164 168 140 140 146 127 128 142 Smaller 144 154 132* 138 122 124 England and 144 154 132* 138 122 124										
West Riding 76 Great 164 168										
76 Great 145 160 140 146 127 128 142 Smaller 144 154 132* 138 122 124 England and 144 154 132* 138 122 124		154	151	133	132	146	128	133	118	121
Towns 145 160 140 146 127 128 142 Smaller Towns 144 154 132* 138 122 124 England and	West Riding	164	168							• •
142 Smaller 144 154 132* 138 122 124 England and 144 154 132* 138 122 124	76 Great									
Towns 144 154 132* 138 122 124 England and	Towns			145		160	140	146	127	128
England and	142 Smaller									
	Towns				144	154	132*	138	122	124
	England and									
the 218	,									
Towns 125 113† 115 106 110	FF					125	113†	115	106	110
Dewsbury 190·5 177 135 177 165 189 170 153 165			1		177		1 '		1	ł
	J									

^{* 141} smaller towns.

The 98 infantile deaths were distributed amongst the various months of the year, as follows:—

		Males.	Females.	Males.	Females.	Total.
January		6	1			
February	• • •	5	1			
March	• •	6	4			
1st Quarter	• • •			17	6	23
April		4	1			
May		0	$\frac{2}{2}$			
June		5	2			
2nd Quarter				9	5	14
July		5	3			
		5	9			
	• • • •	8	9	4.0	27	2.0
U U	• • •	10	4	18	21	39
	• • • †	3	4			
		$\frac{2}{7}$	4			
	• • • .	7	2	10	10	00
4th Quarter	• • • •	• • •	• • •	12	10	22
			-			
Total		56	42	56	42	98

[†] England and Wales, less the 219 towns.

Infantile Mortality from various causes during each month of the year, with the corresponding totals of three previous years:—

Di	SEASES.			January	February	March	April	May	June	July	August	September	October	November	December	Totals, 1908.	Totals, 1907	Totals, 1906.	Totals, 1905.
PREVENTA	3LE:-			Į															
Small-pox																• •			
					• •	1									• •	1			
sfeasles		4 4 9		2						• • • •						2	2	5	3
Scarlet Fever																• •			• •
Diphtheria and Cr	oup										• •					• •	• •	• •	
Vhooping Cough											2				2	4		9	3
Diarrhœal Disease	;																		
Diarrhœa					• • • •					1	8	7	2			~~	2	13	21
Enteritis (not	Tubercula	r)				1				1		1		- • • •		3	••	6	2
Gastritis & Ga	astro-Intes	tinal Catar	rli							1						1	4	3	3
Cuberenlar Diseas	es—		ĺ																
Tubercular M	eningitis –	• • •				-				1						1		1	1
Tubercular Pe	eritonitis																• •	• •	• •
Other Tuberer	ılar Diseas	es					1									1	2	1	• •
Erysipelas																• •	1		2 .
syphilis																	1	3	4
Rickets	- •						1			1					1	3			1
ceidents and Neg	fligence																	4	4
Vant of Breast M	ilk				2											2	1	1	
ther Causes																		1	
																— 36	— 13	47	_ 4
NON-PREVE		_														1		1	1.0
Premature Birth				1		1								1	2	8	18	14	19
longenital and De	velopment	al Defects							1	1		1	1			4	3	5	• •
		• • •											!	.					• •
other Causes		• • •		1												1	* *	1	• •
			1													— 13	- 21	- 20	- 1
DOUBTFULL								_			- 1								1.0
trophy, Debility.	Inanition.	, Marasmu	- 5	1	1	1	2	1	1	1	1	4	1	$2 \mid$		16	19	18	19
Ieningitis not T	ubercular,	***				- • •			1		1					2	1	2	3
lonvulsions	* * *	• • •		1	1				1	1	'	1			1	7	9	5	6
Bronchitis	• • •				1	1	1					1	1	2		7	12	6	11
aryngitis		• • •																• •	
neumonia				• • • •		5		1	2		1	2			2	13	12	7	15
Dentition										,		• • • •					• •	• •	4
ther Causes	* * *			1		,							1	1	1	4	4	4	2
		•														49	- 57	- 42	- 6
									-										
TOTA	7.9	4 + 6		7	6	10	5	2	7	8	14	17	177	6	9	98	91	109	12

From the preceding tables you will see that there have been seven more infantile deaths during 1908 than in the previous year, though 11 and 26 fewer than in 1906 and 1905 respectively.

The infantile death rate throughout the country showed a slight increase last year, but not to the same extent as that in Dewsbury. My surmise that the comparatively small number of such deaths from preventable causes in 1907 would not be maintained has, unfortunately, been correct, the number 13 having risen to 36. This group of cases more than accounts for the increase of deaths. There were 22 deaths from diarrhœal diseases as compared with 6, and in addition 4 from whooping cough.

The non-preventable group shows a decided decrease, and the doubtfully preventable group also a decrease. Similarly to 1907

the second and fourth quarters were the least fatal periods. In 1907 the most fatal quarter was the first, chiefly owing to respiratory diseases, whereas in 1908 the third quarter was the highest chiefly owing to diarrheal diseases—this form of illness being concomitant with a period of hot dry weather.

Prevention of Infantile Mortality.—The Sanitary Committee have taken great interest in this subject and encouraged any scheme brought forward to improve existing conditions.

The Notification of Births Act has been adopted.

A Lady Health Visitor has been appointed.

The pamphlets on the Care and Feeding of Children drawn up in September, 1905, have been made use of.

Food has been given during the lying-in period to mothers who have been quite unable to obtain necessary support owing to poverty.

A food has been supplied for some infants whose mothers were unable to feed them naturally and who really could not afford to buy the preparation for themselves.

(The last two forms of help were commenced in the 2nd week of October, the total amount spent being £9. 19s. 6d. In addition help has been obtained through private sources and dispensed by Miss Brabyn.)

The Notification of Births Act was adopted early in the year, but real use was not made of it until April 15th, as the Lady Health Visitor did not commence her duties until that date.

On April 1st all the midwives known to be practising in the Borough and also medical men were supplied with stamped and addressed printed post cards and letter cards and also a copy of the regulations. In the case of the midwives I also personally explained the whole subject to them.

According to the Registrar's returns there were 426 births from April 15th to December 21st. (Those registered during the first six weeks of 1909, but born in 1908, have been included). The number of notifications which should have been received was

423; three of the births occurred on the last day of the year and therefore the notifications would not be received until 1909.

Number of notifications received was 380, hence 43 were not notified; of these 14 were born in the Workhouse, and as these are registered within a day or two after the birth and long before they leave the Institution, one can dispense with notifications from that body. This leaves 29 unaccounted for. The information respecting these has been obtained in the usual way through the Registrar, and in some cases earlier; sometimes whilst the Health Visitor is visiting one house she may be told of another recent birth.

Of the 29 unnotified 15 have been attended by medical men.

" 8 " uncertified women.

", 4 have been attended by four certified midwives who had not received our notification forms and did not know they were in practice.

Of the remaining 2 I am not certain whether a doctor was in attendance or not, but probably this was so, as it was not considered necessary to visit them.

Those cases not certified in which medical men were at the birth may, I think, be accounted for as follows:—The doctor may have told the parents of the child to notify and they have not understood, and again if one does not fill up the form at once it is very easy to forget it. I myself in this way forgot to notify a case until the third day, though it was not one to be put on the Visitor's inspection list.

THE LADY HEALTH VISITOR.—Miss Brabyn, who is a trained nurse, and has had considerable previous experience in district work of all kinds, including similar work to her present work, was appointed in April and commenced her duties on the 15th.

On the evening of the 14th the Chairman of the Committee entertained to tea all the midwives known to be practising in the Borough. This was done in order that Miss Brabyn should commence work under favourable conditions. It was the opportunity taken for mutual introduction, and the Chairman explained the matter to the midwives. I afterwards gave them all the notifi-

cation forms and elucidated several points upon which they asked for explanation.

The number of cases on the visiting list was 537. Some have only had one visit, further ones not being necessary. Others have received varying numbers of visits, and some daily for periods of two or three weeks and then less often. The total number of visits paid was 3,763.

Miss Brabyn has done a good work and been well received, and although the infantile mortality has been high, it would probably have been higher if this class of work had not been undertaken. Benefit should accrue year by year.

Many mothers have looked forward to Miss Brabyn's visit and have been disappointed when she had not been. Some have faithfully followed the recommendations and advice given them; some have been backsliders, the opinions of neighbours being too strong for the inexperienced; and others have been careless, and there are cases of absolute callousness.

Ignorance on the subject of feeding is very often to the fore, the giving of bread and other starchy foods to young infants being very common, in spite of frequent advice and warning. That mothers sometimes know they are doing wrong by giving this kind of food is evident, for they at first absolutely deny it and later admit it.

Only a few weeks ago a middle-aged woman who was taking charge of a baby told me she was giving it bread in its milk. On remonstrating with her she calmly told me that all her children had had bread, and all got on well. After cross-examination I found that she had had eight children—one died at nine years of age, and all the other seven died at three months old or under, and from convulsions in each case.

There are instances of infants having gruel. In one case a child of three months had had strawberries and bananas.

Another form of carelessness is the taking out of infants when they ought to be indoors. The following is an example which I take from Miss Brabyn's report:—In another case the baby, who was suffering from a bad cold, was taken out visiting at 1 a.m.

Christmas morning, returning home about 3 a.m., and a few hours later the doctor was sent for, but the child died the same day at 6 p.m.

I believe a few inquests in certain cases would have a beneficial effect.

Of those children dying from gastro-intestinal affections only two were entirely breast fed, and 17 were known to have been improperly fed.

Two of the seven deaths from convulsions and three of the sixteen from marasmus, malnutrition, and debility had been improperly fed.

Of those dying from bronchitis or pneumonia five had been carelessly exposed in bad weather.

The older girls in the Elementary Schools are taught the subject of infant feeding; they have also practical lessons on the clothing of infants, large dolls being used for models. I have seen some of the essays written on the subject by some of the girls and have been surprised at the common sense and knowledge displayed.

During the year 60 infants have been put out to nurse. In many or most cases the mothers have been obliged through poverty to go out to work. Perhaps the father has been out of work, or his earnings were too small to support the family. The mothers pay three or four shillings a week to the woman in charge, and the cost of the food in addition. A crêche would be a boon in such cases, and I believe most mothers would gladly avail themselves of its privileges. Once started it would probably be self-supporting or nearly so. The great difficulty would be how to get the infants there in the morning, especially those cases where the homes were some distance away. This is a question which I hope to be able to go into next year.

THE MIDWIVES ACT, 1902.

The Local Supervising Authority is the West Riding County Council. I personally think in Boroughs like Dewsbury, and especially those which have trained Lady Health Visitors, whose duties bring them into close contact with recently-confined mothers and also with the midwives, the Local Supervising Authority should delegate the powers to the Borough Council.

At the end of the year there were eleven Certified Midwives practising in the Borough; of these, two are certified by examination. Eight reside in the Borough.

Approximately 339 confinements were conducted by midwives, no medical men being present. The number of cases attended by each were: 109; 51; 42; 39; 34; 29; 13; 11; 7; 3; 1.

There has been no provision made for the payment of medical men called in, in emergency, by midwives, although as I understand this matter has been placed before the Board of Guardians by a local Medical Society. Most doctors in the town will probably have had the experience of this emergency work, without receiving any fee. I know I have.

The Dewsbury Union Workhouse Infirmary is being used as a training ground for Midwives.

THE SEVEN PRINCIPAL ZYMOTIC DISEASES.—Under this heading are included Small-pox, Scarlet Fever, Diphtheria, and Membranous Croup, Measles, Whooping Cough, Enteric Fever, and Diarrhœa.

These diseases were the cause of 49 deaths (22 males and 27 females) which is equal to a rate of 1.8 per 1,000 of the estimated population. Zymotic death rates for the years 1905 to 1908 inclusive are given in the following table:—

		-	E	Zymotic I per 1,00 stimated	Death Rate 0 of the Population	e.
			1908.	1907.	1906.	1905.
England and Wales			1.29	1.26	1.73	1.52
76 Great Towns			1.59	1.54	2.24	1.88
141 Smaller Towns			1.36	1.29	1.70	1.50
England and Wales, les	ss the 217	Towns	.99	.91	1.18	1.09
Dewsbury	• • •		1.8	1.00	2.45	2.48
V						

The number of deaths and the death rate from each of the 7 principal Zymotic Diseases, together with the month in which they occurred is shewn as follows:—

Dis e as e .	Total Deaths.	Death Rate per 1,000 living.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.
Small-pox Scarlet Fever Diphtheria and Membranous Croup Measles Whooping Cough	1 5 6	·03 ·11 ·03 ·18 ·22	3	1		•••	1	··· 1	1 1	3	1	1	1	2
Epidemic Diarrheal Diseases Enteric Fever Totals	40	1.03	1 4			• • •	1 2	1	3	11 1 15	9 2	7 8		2

In 1907 Measles caused more deaths than all the other Zymotic Diseases put together. This year the remark applies to Diarrhœal Diseases, as previously stated 22 were amongst infants.

SMALL-POX.—One death occurred from this disease. It was the only case notified. The disease attacked an unvaccinated male aged 27 years. The notification was received on June 22nd and the patient died on July 3rd. Everything possible was done to prevent the spread of the disease, and fortunately no other cases occurred. I furnished you with a report of the action taken, and also sent one to the Local Government Board and to the West Riding County Medical Officer, therefore I need not go further into the subject again in this Report.

Whooping Cough caused six deaths as compared with one the year previously, and Typhoid Fever five as compared with three.

Measles caused five deaths as compared with sixteen in 1907, two of the five were under one year old, one was aged one year, one was three years of age, and the remaining case six years old.

Tuberculosis caused 65 deaths of residents, including three who died in institutions outside the Borough. The death rate therefore was 2.41 per 1,000 living.

The 65 deaths are classified according to sex and site as follows:—

		Males.	Females.	Totals.
Tubercular Meningitis Tuberculosis of Lungs Other forms of Tuberculosis	• • •	$\begin{array}{c} 8 \\ 21 \\ 7 \end{array}$	2 22 5	10 43 12
Totals		36	29	65

The following table gives the comparison with other years of deaths due to Consumption and to the other Tubercular diseases:—

	1900	1901	1902	1903	1904	1905	1906	1907	1908
Consumption Other forms of Tuber-	38	36	45	41	38	35	47	38	43
culosis	19	25	22	18	17	12	22	11	22
Totals	57	61	67	59	55	47	69	49	65

Of the 65 total cases 6 died in public institutions in the Borough; and in addition to the 65 residents there were 12 deaths from tubercular diseases of non-residents in institutions in the Borough, viz., nine from consumption and three from other tubercular diseases.

The age periods of deaths of residents from Tuberculosis are shown in the following table:—

Age Perio	od.		Number of Deaths.	
(Pers	ons		65	
All Ages Male	28	• • •	36	
$egin{aligned} ext{All Ages} & egin{cases} ext{Pers} \ ext{Malo} \ ext{Fem} \end{aligned}$	ales		$\overset{\circ}{29}$	
(1 011			Intel U	
0-5 years	• • •		13	
5-10 ,,			3	
70.75		• • •	$\overset{\circ}{4}$	
15 90	• • •	• • •	$\overset{\pm}{6}$	
20.25	• • •	• •		
,,,		• • •	7	
25-35 ,,		• • •	12	
35-45 ,,	* * *	• • •	8 5	
45-55 ,,		• • •	5	
55-65 ,,	• • •		5	
65-75 ,,			2	
Over 75 years			$\bar{0}$	

In December, 1907, the Council decided to adopt, on my recommendation the system of voluntary notification of Consumption, and offered to pay the sum of 2/6 to the medical practioner for each certificate received.

On page 17 of 'my report for the year 1907 is a copy of the letter sent to each practitioner explaining the matter.

Two books of certificate forms were also sent,

A—being an ordinary notification.

B—a form stating that the necessary precautions were being taken with respect to the disease, and that it was not desirable that any Inspector should call at the house.

During the year I received notifications of nine cases altogether, in five of these it was desirable that we should not visit the house.

Of the nine cases seven died before the end of the year, one removed to a neighbouring Borough, the name and address being sent to the M.O.H. of that Borough, and the remaining case is reported to be improving.

In four cases visits from the Sanitary Authority were not objected to. The Lady Health Visitor frequently visited the houses. Two of the cases were brother and sister in one house. The house was found to be dirty and overcrowded. The people were persuaded to move into a larger house and it was kept in a cleaner state than the former one. The house which they left was disinfected by the Sanitary Authority, the walls were stripped, and the house repapered, painted, and lime-washed by the landlord. In the other two houses general conditions were satisfactory. The pamphlet on "Consumption" has been made use of where visits to houses have been made.

Disinfection of houses, after a death from Consumption has taken place therein, is carried out by the Sanitary Authority. Bedding, clothing, etc., being removed for treatment in your steam disinfector.

The Registrar of Births and Deaths sends me immediate notice when a death from consumption has been registered, if it has occurred in a private house. This has been in vogue since January,

1906. In only one case since then has disinfection not been allowed by the householders, and we were given to understand in this case that the medical man in attendance would see to anything which might be advisable.

You will agree that the system of voluntary notification has not been a success. I consider that consumption should be a compulsory notifiable disease.

An important step has recently been made.

The Local Government Board issued in December, 1908, the Public Health (Tuberculosis) Regulations, 1908, which came into force on January 1st of this year (1909). We shall have knowledge of the existence of cases of consumption in persons who are patients under the Poor Law Officials.

ARTICLE IV. provides that the Medical Officer of a Poor Law Institution shall, within 48 hours of his becoming aware that an inmate is suffering from Pulmonary Tuberculosis, notify the fact (giving patients name and address of the house in which he lived before admission to the Institution) to the M.O.H. for the area in which patients home was situate.

ARTICLE V. provides that a District Medical Officer shall within 48 hours after his first recognition of the symptons of Pulmonary Tuberculosis in the case of a poor person upon whom he is attending under the Poor Law provisions, notify the fact (giving name and address of patient) to the M.O.H. for the area in which the residence of the poor person is situate.

ARTICLE VI. provides that the Superintending Officer of a Poor Law Institution shall, within 48 hours after the departure from the Institution of a poor person in relation to whose case a notification to a M.O.H. has been made in pursuance of Article IV, according to the best of his information with respect to the actual or intended place of destination of such poor person and his intended address at such place, notify the facts to the M.O.H. for the area in which such place is situate.

ARTICLE VII. provides that, with respect to a poor person about whom a notification has been sent to the M.O.H. according to Article V, a Relieving Officer shall notify any change of address of the said consumptive, and give the new address to the M.O.H. for the area in which the changed residence is situate. Such information to be given within 48 hours after its accuracy has been determined.

The Regulations state the amount of remuneration to be paid by the respective councils for the various notifications sent to them.

CANCER.—During the year 25 residents (8 males and 17 females) died from Cancer, including under this heading all kinds of malignant disease.

In 1907 there were 30 deaths, and in 1906 21 deaths from this cause.

In addition to the 25 residents 5 non-residents died from Cancer.

The following table shows the parts of the body affected:

All forms of Malignant Disease.	Tongue.	Oesophagus.	Stomach.	Liver.	Rectum.	Breast.	Uterus.	Bladder.	Chest.	Jaw.	Glands of Neck.	Totals.
Males Females Totals	2 2	1	$\begin{bmatrix} 1 \\ 3 \end{bmatrix}$	$\frac{1}{2}$	$\frac{2}{2}$	1	4	$\frac{2}{1}$	i	1	<u>i</u>	$ \begin{vmatrix} 8 \\ 17 \\ \hline 25 \end{vmatrix} $

ANTHRAX.—One case of this disease has occurred during the year. There is little or no doubt that the youth contracted the disease by handling a small book which had become infected by being in the hands of a carter who had previously handled a skin from a beast which had died from the disease. The boy inoculated his face by scratching. The case was treated in the Infirmary, excission was not performed, local application of antiseptics, and the injection of Anti-Anthrax Serum was the treatment adopted. The boy recovered. The beast which died from the disease was in a district some miles from Dewsbury.

DEATHS IN PUBLIC INSTITUTIONS in 1908.—The total number of deaths in Public Institutions within the district was 185. Of these 102 were males and 83 females.

Deaths in Public Institutions within the district, 1908.

		Persons.	Males.	Females.
Reidents Non Residents	• • •	$\frac{85}{100}$	43 59	42 41
Totals	• • •	185	102	83

The following table shows the Public Institutions in the Borough in which deaths occurred:—

•	Institution.	Total Deaths.	Residents.	Non-Residents.
Dewsbury	Union Workhouse	131	49	82
Dewsbury	General Infirmary	54	36	18

The term "Non-Residents" means persons brought into the district on account of sickness or infirmity, and dying in institutions there. They are omitted from the net deaths belonging to the district. The deaths of Dewsbury residents dying out of the district are added to the net deaths belonging to the district, as described previously.

In addition to the 100 deaths of non-residents in Public Institutions, there were two deaths of non-residents in the street.

The districts to which the 102 non-residents belong are as follows:—

	District.			Number of Deaths
Ravensthorp	e			9
Batley		• • •		29
Morley			• • •	8
Birstall		* * *	• • •	6
Heckmondw	ike			10
Liversedge				7
Ossett	• • •	• • •		9
Thornhill				4
Soothill Upp	er	• • •		5
Soothill Net	ner			6
Mirfield	• • •	• • •		3
Birkenshaw			• •	1
Gomersal	• • •			3
Rawcliffe	• • •			1
Leeds	• • •	• • •		1
	Totals	• • •		102

DEATHS OF DEWSBURY RESIDENTS OUTSIDE THE BOROUGH.—
There were 20 such cases, 9 of which were males and 11 females.
The following table shows how they were distributed:—

Institution.		Males.	Females.	Total.
Bradford Eye and Ear Hospita West Riding Asylum Leeds General Infirmary Dewsbury Joint Hospital Board Fever Hospital	• • •	 6 1	1 5 1 4	$ \begin{array}{c} 1 \\ 11 \\ 2 \end{array} $
Small-pox ,, Totals	• • •	9	11	20

Uncertificated Deaths and Inquests.—There were 595 deaths registered in the Borough during the year. In 545 cases the deaths were certified by registered medical practitioners, in 49 cases inquests were held by the Coroner, and certificates given by him, and one death of an infant was unregistered.

Tabulation of the Causes of Death and the Ages at Death.

Deaths i	itioi	as.	DISEASE.	-	0-1 year.	1-2	2-3	3-4	45	Total unde	er 510	10—15	15-20	20-25	5 25—35	35—45	4555	55-65	65-75	Over 75	Total 5 year and	Lotai
Non-Res.	Res	ident		-							-	-				-	-			years.	upwards.	all ages
M. F.	M.	F.		-	M. F.	M. F.	M. F	M. F.	M. F.	M. F. P.	M. F.	M. F	м. г.	M. F	. M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F. P.	M. F. P.
	• •		Small-pox	••	i	i				1 1 1					1			•• ••			1 0 1	1 0 1
** **		-::	Chicken-pox Scarlet Fever				i	i i		1 1 2			1:: 'i				••			•• ••	2 3 3	1 1 2
		- 1	Epidemic Influenza					1		0 1		1	i. î			1 1	i	2	1 1	3	$\begin{bmatrix} 0 & 1 & 1 \\ 2 & 9 & 11 \end{bmatrix}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
	• •	•••	Whooping Cough	• •	1 3	1	••	i ::	1	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	تناسنت و											1 5 6
		::	Diphtheria and Membranous Croup Measles		2	1		1. i		$\begin{bmatrix} 1 & 0 & 1 \\ 2 & 2 & 4 \end{bmatrix}$: i					•• ••			•• ••	•• ••		1 0 1
			Diarrhœa and Dysentry	• •	3 2	1 1		1		4 3 7						1	i		i	i	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	8 3 11
•• ••	• •		Epidemic and Zymotic Diarrhœa Gastritis and Enteritis	• •	3 1	1	1 .	2	i ::	7 10 17			1				ļ	•• ••				7 10 17
		::	Typhoid Fever.			l				4 2 0		2	:: 'i	1	: :: ::		1 :: ::	1	1		$\begin{array}{cccccccccccccccccccccccccccccccccccc$	6 2 8
••	• •	[Anthrax	••					•• ••			1			1					•	1 4 5	1 4 5
•• ••	••		Syphilis Erysipelas	• •					•• ••	•• •• ••		•• ••		1				1				
			Puerperal Fever					:: ::				:: ::		** **	••							
•• ••	1		Septicaemia	.		•• ••										1			:: ::		1 0 1	1 0 1
4 5	1 1		Tubercular Meningitis Tuberculosis of Lungs	••	1	1 1	1	1	: i	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	1	1	2 3	3 3				.: ::			$\begin{array}{cccccccccccccccccccccccccccccccccccc$	8 2 10
1 2	2		Other forms of Tuberculosis			î	1					1	2 3	3 3		$\begin{vmatrix} 2 & 4 \\ 2 & \dots \end{vmatrix}$	1 3	$\begin{bmatrix} 2 & 1 \\ 1 & 1 \end{bmatrix}$	2	••	19 20 39	21 22 43
3 2	2	2			••								î			2 1	1 5	2 3	2 6	i i	6 4 10 8 17 25	7 5 12 8 17 25
•• ••	••	*	Rheumatism Diabetes	- 1				•••••		•• •• ••		•• ••	1	•• ••)		1 12	1		1	1 3 4	1 3 4
•• ••		i	Lead Poisoning			:: :.						1:: ::	:: ::	:: ::		1 :: ::	1			••••	$\begin{bmatrix} 1 & 0 & 1 \\ 0 & 1 & 1 \end{bmatrix}$	1 0 1
			Leucocythæmia	- 1		•• ••							i			:: ::					$\begin{bmatrix} 0 & 1 & 1 \\ 1 & 0 & 1 \end{bmatrix}$	$\begin{bmatrix} 0 & 1 & 1 \\ 1 & 0 & 1 \end{bmatrix}$
	• •	::	Pernicious Anæmia Premature Birth	••	5 3	•• ••				5 3 8	••••					1	1		1		$\begin{array}{cccccccccccccccccccccccccccccccccccc$	1 2 3
• • •			Rickets .		3	i			:: ::	4 0 4			:: ::	1:: ::	1	•• ••	:: ::			•• ••	0 1 1	5 3 8
		_ ,	Developmental Diseases and	- }	0 0							'' ''	1	1	'' ''						0 1 1	4 1 5
1	• •	1	Congenital Defects Want of Breast Milk		$\frac{2}{2} \cdot \frac{2}{1}$	1				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		1									0 1 1	2 4 6
			Malnutrition, Marasmus		4 1				1 :: ::	4 1 5						1 :: ::	:: ::		•••••			2 0 2
10 10	1		Debility, and Inanition	• •	8 3	••	•• ••			8 3 11										:: :.		8 3 11
19 13	4	4	Old Age Insanity	- 1		**			•• ••						1			0 2	5 6	7 11	12 19 31	12 19 31
., .,			Softening of Brain	- 1												1:: ::		:: ::	i			
			G. P. I.	••		:			14				i	ļ		2	1	i			$\begin{bmatrix} 0 & 2 & 2 \\ 3 & 2 & 5 \end{bmatrix}$	3 9 5
. 1	1		Meningitis Cerebral Tumour		2	1		1	•• ••	3 1 4	1				1						1 1 2	4 2 6
	1		Epilepsy									:: ::		1 :: ::	2 1	1		•••				
)	Laryngismus Stridulus	• •	1	1 1				2 1 3			:: ::	:: ::	i -	1		:. :.			3 1 4	$\begin{bmatrix} 3 & 1 & 4 \\ 2 & 1 & 3 \end{bmatrix}$
•• •	• •		Paraplegia Peripheral Neuritis				•• ••	,.	•• ••						•••••		1	1			1 1 2	$\begin{bmatrix} 1 & 1 & 3 \\ 1 & 1 & 2 \end{bmatrix}$
			Convulsions		2; 5	3				2 8 10					•••••	:: ::		•• ••	•• ••	•• · · ·		
1			Other Nervous Diseases Valvular Disease of Heart	••							1											2 8 10
4 2	9	$\frac{2}{\cdot \cdot \cdot}$	Pericarditis Heart	- 1	•• ••	:: ::						1	1	2 1	. 4 2	1	3 3	4 3	2 3	1	13 13 31	18 13 31
			Dilatation of Heart											:: ::		:: ::			•• ••		•• •• ••	
1	••	-:	Fatty Degeneration of Heart Syncope and Heart Disease	1	••											1		:: ::	i		1 0 1	1 0 1
7 3	2	1 5	Cerebral Hæmorrhage				••	•• ••	•• ••	•• •• ••		•• ••	•• ••	•• ••	•• · · ·	2: 12	2	5 1	2		7 3 10	7 3 10
			Articio Sclerosis									** **				1 1	3	4 3. 2 0	1	1	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	9 11 20
1	i	• •	A outo Bronchitic	••									7.			11	. 1	0 1	1 4	1	1 8 9	
2 3	1	5	Chronic Bronchitis		3 4	2 1			••	5 5 10	1		•••••	•• ••	•••••		$\begin{vmatrix} 2 & \ddots \\ 1 & \end{vmatrix}$	3 4	2 6	. 1	8 11 19	13 16 29
1	3	3	Lobar Pneumonia	• •	1			**		1 0 1	1:: ::	:: 'i		: 'i		3 1	1 3	1	4 1	1 4	5 11 16 7 8 15	5 11 16 8 9 16
•• ••	1 1		Drammania and defead	••	7 5	3 1	1 2	1 1	2	14 9 23	4								1	i	1 5 6	8 9 16 15 14 29
•• ••			Pleurisy		:: :					•• • • •	•• ••				1 4		1	4	2 1	1	8 1 9	8 1 9
•• ••			Empyema Other Diseases of Respiratory Organi	no col							1:: ::	:: ::	: ::	:: ::					1		2 0 2	2 0 2
1	1		Other Diseases of Respiratory Organiseases of Stomach		•• ••	•••									1 1			1	1		2 1 3	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
		1	Diseases of Gall Bladder, &c.											i	1	1 1	i	1	i	•• ••	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	2 1 3
$\begin{array}{ccc} 2 & 1 \\ 1 & 1 \end{array}$	1		Intestinal Obstruction Peritonitis and Appendicitis	••	••	•• ••	1	i		1 1 2							1		1	i	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{bmatrix} 2 & 1 & 3 \\ 2 & 1 & 3 \end{bmatrix}$
	1		Alcoholism and Cirrhosis of Liver				1			0 1 1			1				1				2 0 2	$\begin{bmatrix} 2 & 1 & 3 \\ 2 & 1 & 3 \end{bmatrix}$
1		• •	Other Diseases of Liver		•• ••	••		l :: ::	: ::					:: i		!:: ::					$\begin{bmatrix} 2 & 0 & 2 \\ 1 & 1 & 0 \end{bmatrix}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
2	2		Myxœdema Nephritis and Bright's Diseasc	1	-		j				1					1						1 1 2
1	1		Other Diseases of Urinary System		1	•• ••	•••			0 1 1		••••		1 1		1 1	2 7	2 1	2 6		8 16 24	8 17 25
• • • •			Affections of Female Genital Organ	ıs] :: ::		1:: ::		• ",			1	: i	• • •	1	:: ::	$\begin{array}{cccc} 2 & 0 & 2 \\ 0 & 1 & 1 \end{array}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
10	3		Accidents, &c., of Parturition Accident or Negligence	••	•• ••								1		2			••			0 3 3	$\begin{bmatrix} 0 & 1 & 1 \\ 0 & 3 & 3 \end{bmatrix}$
			Suicides			1	1		•• 1	0 3 3		1	••			1	$\begin{bmatrix} 1 & \cdots \\ 1 & \cdots \end{bmatrix}$	1 1	3		4 4 8	4 7 11
1			Undefined Causes						** **	0 1 1	1:: ::			30				••		::	1 0 1	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
1	::	• •	Found Dead All other causes		•• ••			•• ••					** **			,,			1		0 1 1	0 1 1
1		•			•• ••	••	•••			1 1 2		1			•• ••		••	•• ••		•• ••	0 1 1	1 2 3
P.C	-										-											
59 41		42	TOTALS		56 42	14 16	5 5	6 5	3 3	84 71 155	3 9	4 7	9 8	7 9	22 12	20 13	20 32	36 29	35 46	11 26 1	67 191 358	251 262 513
100		85	TOTALS	1	98	30	10	11				11	17	16	34	33 .	52	65				
						30	10	11	6		12	11	11	10	94	00 .	02	00	81	37		
													-									

NOTIFIABLE INFECTIOUS DISEASES.—During the year 76 cases of Infectious Diseases have been notified by medical men. The following table shows the number of cases occurring at each of the six age periods:—

			Cas	ses Notific	ed in Wh	ole Distr	ict.					
Notifiable Diseases.		At Ages.—Years.										
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	At all Ages.				
T) 1 /1" '		1		4	1	$egin{array}{c} 1 \ 2 \end{array}$		1 11				
Erysipelas Scarlet Fever Enteric Fever	• • •	• • •	$egin{array}{c} \cdots \ 7 \ 2 \end{array}$	 16 10	1 2 8	6 1 10	• • •	7 26 30				
Continued Fever Puerperal Fever		• • •	• • •		1	• • •	• • •	1				
Totals	• • •	1	12	30	13	20	• • •	76				

The following table shows the incidence of the diseases during the different months of the year, also the removals to the Hospital month by month.—

	x.	ver.	a.	or ever.	-	s ₂		F	Remove	ed to H	Hospita	al.
Month.	Small-pox.	Scarlet Fever.	Diphtheria.	Enteric (Typhoid Fe	Puerperal Fever.	Erysipelas.	Totals.	Small-pox.	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Totals.
January February March April May June July August September October November December	1	1 1 2 2 2 3 9 2 1 3	2 1 1 3 1 2	1 1 2 1 10 6 2 4 3	1	2 1 1 3	2 3 3 5 7 5 2 15 15 4 8 7	1	1 1 1 2 2 9 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 7 4 2 3 2	2 2 2 2 3 3 1 9 13 4 3
TOTALS	1	26	11	30	1	7	76	1	20	6	20	47

^{*} This case, removed early in January, was notified in December, 1907.

The number of Infectious Diseases notified during each of the past eight years is shown in the next table:—

	Small-pox.	Scarlet Fever.	Diphtheria.	Membranous Croup.	Typhus Fever.	Enteric or Typhoid Fever.	Continued Fever.	Relapsing Fever.	Puerperal Fever.	Cholera.	Erysipelas.	Chicken-pox.	Totals.
1901	ĺ.	229	11	2		10			1		14		267
1902	7	95	16	1		10	10				23		162
1903	137	50	17			13			2		18		237
1904	552	50	35			27			• • •	• • •	14	45*	723
1905	12	162	42	1		19	3		1		16	44	300
1906		48	24			21	1		2	• • •	10	33†	139
1907	1	65	17		• •	22			2		16		122
1908	1	26	11			30			1		7		76

^{*} Since October 24th to end of year. † To April 19th.

Table showing streets where Infectious Diseases have occurred.

Arthur Street Ashworth Road Bank Street Bank Street Upper Battye Street Bradford Road Brooke Street Birkdale Road Cross Street Church Lane East Parade Eightlands Road Granville St. Back Halifax Road Heckmondwike Road Huddersfield Road Hartley Street	Single Service Small-pox.	1: : 1 2: : : : Scarlet Fever.	o: : : : : : : : : : : : Diphtheria.	Typhoid Fever.	: Huerperal Fever.		Mallinson Street Northfields Parker Road Pit Street Princess Street Park Road Ridgway Street Ridgway Street Rishworth Street Russell Street School Lane Staincliffe Road Tentercroft Road Thornhill Road Tweedale Street Wellington Road Woodville Road	ack	: : : : : : : : : : : : : : : : : : :	1 Scarlet Fever.	: : : : : : : : : : Diphtheria.	Typhoid Fever.	: : : : : : : : : : : : : Puerperal Fever.	Erysipelas
Haalda Dood		1	$\overset{\cdots}{2}$				Watergate Road Watergate Road		• •	1	• • •	2	,	• • •
Halliley Street		1					Whitley Street		•••	3	1	1		
Ingham Road Kensington St. Back	• • •	-••	• • •	2	• • •	• • •	West Park Street Willans Road		• • • •	1		2	• • •	• • •
Lawson Street Back				1					•••			• • •	• • •	• • •
Leeds Road		2	1	 1	•••						_		-	_
Market Place Middle Road	• • •	1	• • •	· · ·			Matala.		1	26	11	30	1	7
Milton Street			•••	1			Totals .)			76	3		

Seventy-six notifications of Infectious Diseases in one year is the smallest number received for many years. The diminution is shown in every disease with the exception of Typhoid Fever, and the single case of Small-pox, remarks upon which I have made when dealing with the deaths from these diseases.

TYPHOID FEVER.—Thirty cases were notified, and twenty were removed to the Hospital. Two died in the Hospital and three in their own homes.

There were more cases notified of this disease than for many years. Of the 30 cases I know that the serum test was applied in 13 cases before notification, all of these but one giving a positive reaction. Whether any of the other 17 cases were so examined I cannot vouch for, as primary negative results are not given by the County Council M.O.H. to the M.O.H. of the district to which the cases refer.

In all cases enquiries were made at the homes as to the possible source of the disease and inspections of sanitary conditions made. The greater number of cases occurred in the last five months of the year, and chiefly in the month of August. I made a special report to you in September on the outbreak. One milk supply was suspected, but I think it was proved not to be the cause. owner of the farm having been said to have been unwell a short time before the outbreak, the serum test was applied and his blood gave a feeble positive reaction. However, bacteriological examination by the West Riding Bacteriologist of the man's urine and fæces and also fæces from his closet did not show the presence of any typhoid bacilli and therefore one concluded that the man was not infective. Then again the whole outbreak did not appear from enquiries to have been a milk outbreak. No other articles of diet such as shell fish or ice cream could be said to be the cause, for not a single patient had eaten shell fish and only four had had any ice cream (3 in August and 1 in September). Sanitary defects were present on two premises, a defective drain in one, and in the other case a dirty cellar, and an unpaved yard and ventilation of house bad.

In two instances these were evidences of direct infection from preceding case.

At the same time as the cases occurred in August a number also occurred in Ravensthorpe, and the fact that most of our cases at that time occurred in the Western part of the Borough, suggests that there may have been a common cause, but whatever the cause I am afraid one cannot determine. It is quite possible that flies may have been the carriers of the disease.

DIPHTHERIA.—Eleven cases were notified, six of which were removed to the Hospital. There was one death and this took place in the Hospital.

Of the 11 cases the Diphtheria bacillus was demonstrated bacteriologically before notification in six.

Before the cases are certified as being free from infection, a swabbing taken from the throat has given negative results in all cases. Two negative swabs should really be taken, this can easily be achieved in Hospital practice, but it is more difficult with respect to those cases kept at home. If there are school children in a house in which a case exists, they are not allowed to attend school until the house has become free from infection and I have also been able to have swabbings of these contacts examined, and with a negative result before they have returned to school.

SCARLET FEVER.—Only twenty-six cases were notified throughout the year, twenty being sent into Hospital. Three deaths occurred from this disease, two being in the Hospital.

Non Notifiable Infectious Diseases.—These have been chiefly dealt with in my School Report, to which I would refer you. I would here say that 91 cases of infectious diseases received from the Education Department have been investigated.

On receipt of a notification of infectious disease, notice is given to the Librarian of the Public Free Library, so that books be not issued to members of the house in which the case exists until the premises are free from infection, notice of which he receives in due, course. The Secretary to the Education Committee is also notified and if any of the inmates attend a day school, the name of the school and the names of the said children are stated; a further notice is sent to him on the expiration of the infectivity. If a case has been sent to the Hospital he is made aware of the fact, so that any other school children in the house may be re-admitted into school after the necessary period of quarantine, provided no other member of the family has contracted the illness.

Similar information and for the same purposes is sent to the Superintendent of a Sunday School, if the case applies.

DISINFECTION.—On the termination of an infectious illness, or immediately after the removal of a patient to the Infectious Hospital, the necessary disinfection of the house is at once attended to.

In addition one Elementary Day School and four rooms at the Dewsbury and District General Infirmary have been disinfected after infectious diseases. Also, at the request of the occupiers, 27 rooms have been similarly dealt with in houses where deaths have occurred after prolonged illness.

Formalin, in the form of vapour or spray, or both, being the agent as a rule, and those articles, such as bedding, clothing, &c., which cannot be thoroughly disinfected by this method, which is a surface one, are removed to the Depôt and treated in the steam disinfector. There are, of course, separate vehicles for the conveyance of the infected and disinfected articles, and they are kept in a proper condition of cleanliness and repair.

Similar disinfection takes place after Tuberculosis. The Registrar sends me immediate notice when a death from Consumption has been registered. Disinfection of premises during the course of the disease will be done where possible in the future, after the receipt of a notification of the occurrence of such a case.

During the disinfection of certain houses, the rooms at the Disinfecting Station at George Street Depôt have been used for giving shelter to the inmates of those houses. This station answers its purpose very well, but I hope in the not far distant future you will be able to erect a permanent station, properly constructed with floors and walls of impervious material.

Hospital Accommodation for Infectious Diseases.—The Dewsbury Joint Hospital Board, comprises Dewsbury, Heckmondwike, Soothill Upper, Soothill Nether and Ravensthorpe areas. Scarlet Fever, Typhoid Fever and Diphtheria cases are admitted into the Hospital buildings, situated in Soothill Nether, in which there are 70 beds. The Small-pox Hospital is in Ossett, and has 50 beds. At no time during the year have the Board not been able to admit any case which I desired to be taken in.

The following number of specimens have been sent during the year to be examined in the Bacteriological Laboratory, at the County Hall, Wakefield.

Serum (for Enteric Fever)	26
Sputum (for Tubercle Bacilli)	12
Swabbings from Throat (for Diph-	
theria Bacilli)	45
Miscellaneous	7
	95

In the year 1907, the number sent was 83.

FOOD AND DRUGS ACT.

During the year 60 samples have been submitted to the Public Analyst as under:

	m . 1				RESU	ILTS.	
Article.	Total No.	No. of Legal Samples.	No. of Informal Samples.	Genuine	e Samples.	Adultera	tedSamples
	Anaryseu	bamples.	bampies.	Legal.	Informal.	Legal.	Informal
New Milk .	21	21		21			
Dutton	15		15		15		
Margarine .	14		14		14		• • •
Condensed Milk:	i	• • •	3	• • •	3	• • •	
Machine Skimme Milk	. 3		3	• • •	3		
Roon	3		3		3	• • •	• • •
Lard .	1	• • •	1	• • •	1	• • •	• • •
Totals .	60	21	39	21	39	• • •	

It has therefore not been necessary to make any communication to the Board of Agriculture and Fisheries under the Butter and Margarine Act, 1907.

WHOLESALE AND RETAIL MARKETS.—The markets are inspected during market days, and articles of food carefully watched.

There have been three seizures of unsound food, but no prosecutions. In all three cases the conditions of the food was brought to the notice of the Sanitary Inspector by the owner. I also inspected and prohibited the sale. In two cases the consignments were fish, and the third 280lbs. of raspberries.

REGISTERED PREMISES.—The number of Registered Premises within the Borough is as follows:—

Bakehouses	• • •	• • •	16
Slaughterhouses			23
Tripe-boiling Houses	• • •	* * *	4
Soap-boiling Houses		• • •	3
Gut Scraping House	• • •	• • •	1
Cowsheds			14
Dairies and Milk Shops			8
Common Lodging Houses	• • •		6

The only underground bakehouse in the Borough at the commencement of the year 1908 has been done away with. One ordinary bakehouse has also been given up. Two fresh bakehouses have been registered, therefore the total number is the same at the end as at the beginning of the year. The conditions are satisfactory.

SLAUGHTER HOUSES.—One slaughter house has been given up during the year. On the whole they are kept in a cleanly condition. In one or two cases the gulley is inside the building, these should be removed and placed outside. Under present conditions regular inspection of carcases in slaughter houses cannot be carried out I hope that if your Borough boundaries are enlarged you will appoint an official whose duties will chiefly or entirely be the regular inspection of slaughter houses and newly slaughtered animals, combined with this, frequent inspection of milk sheds (and visits at the time of milking), and also of premises where offensive trades are carried on.

TRIPE BOILING HOUSES.—In one the floor has been made thoroughly sound, a needed attention. In another, very considerable alterations and improvements have been made. It is a place of somewhat large dimensions for this class of work. New concrete floors have been laid down, grease traps have been introduced. The boiling pans have had large hoods attached and all the pipes leading therefrom have been conducted into the furnace chimney. Complaints had been received of smelling vapours issuing from the works. The alterations should obviate the nuisance.

COWSHEDS. - During the year, two farmers who had previously kept cows have ceased to do so. One still has a milk round, buying his milk from others. The two sheds were unsatisfactory, chiefly

on account of being badly lighted and ventilated, and one also as to flooring. Alterations were to be made in each case, if the keeping of the animals had continued. There were at the end of the year 14 sheds inoccupation, and since the new year (1909) an additional cow-keeper has disposed of his cattle. This particular shed was unsatisfactory on account of light and ventilation. The trustees of the property have promised to make considerable alterations if the premises are again used.

With respect to the now existing sheds, notices have been issued respecting the following matters.

To provide windows for light and to provide more efficient ventilation.

To contruct more efficient channelling.

To repair pavement in the yard and to remove obstruction from ventilators.

To repair pavement of cowsheds and to provide for more light.

To construct an efficient manure pit.

To provide surface drainage to yard, and to pave the surface yard.

In respect to another shed the trustees have been written to, informing them that the shed is altogether unsatisfactory. They have promised to do away, with this, and send in a plan for the erection of another. The above repairs, etc., to sheds may seem formidable, but this is really not so. General improvements in all sheds having been taking place during the past two years.

In my last year's report I mentioned that although many repairs and improvements had been carried out in one shed, the light and ventilation were insufficient, these very important particulars have since been remedied.

On each shed door has been affixed enamelled plates stating the maximum number of cows which should be kept therein. Your bye-laws stipulate that the minimum air space should be 800 cubic feet per head of cattle. This should be adhered to.

The milk-cans, etc., have generally been kept in a cleanly condition.

Town's water is laid on at all sheds, so that there is always a sufficiency.

During the year ninety visits were paid to cowsheds and in addition on August 13th, the Sanitary Committee made an inspection of them all. This was productive of much good. I believe such visits strengthen the hands of your officials in carrying out certain reasonable measures of reform.

MILKSHOPS.—Of these there are eight. One is a general grocers shop, and five are ordinary dwelling houses. Sale of milk under such conditions I think is fraught with much danger, the cans containing the milk standing in the dwelling room or kitchen in which all the daily domestic work and even washing of clothes is carried on. Although the cans have lids, the milk is exposed to infection whenever this cover is removed in order to take out a portion. The temperature of the room too, will be very favourable to the rapid growth of micro-organisms.

The very necessary inspection of milk-sheds should be supplemented by the inspection of cattle therein. Many authorities have already taken this view and I would advise that the Veterinary Surgeon to the Council be authorized to make inspection of milchcows.

Lodging-Houses.—The registered houses are all kept in a fairly cleanly condition. There has been an improvement in the condition of certain closets which I had occasion to find fault with on former visits. Complaints were made from the owner of a workshop that smells were coming through his floor from a lodging-house W.Cs.' This has been remedied by the closet ceiling being underdrawn and plastered.

WATER SUPPLY.—The Borough of Dewsbury (along with other districts) is supplied through the Dewsbury and Heckmondwike Waterworks Board. The gathering ground is situate among the hills in the Parish of Penistone about 18 miles from Dewsbury. The supply has been sufficient and continuous.

During the year the question of its plumbo solvent action has been prominently brought forward. One death has been certified as being due to lead poisoning, the poisonous substance having been conveyed through the drinking water. Samples have been analysed and varying amounts of lead in dangerous quantities have been proved to be present. The Dewsbury Corporation have by resolution in Council resolved to do their best to secure that all

water distributed by the Dewsbury and Heckmondwike Waterworks Board shall in future be so treated before distribution as to render it non-plumbo solvent.

I quite agree that this the proper thing to do, and the sooner the better.

Sanitary Inspection.—The annual report of the Sanitary Inspector shows that during the year there have been—

2675 Inspection of houses and other premises.

4013 Re-inspections ,,

1392 Notices issued for sanitary amendments.

241 Letters ,, ,,

The total number of nuisances reported during the year was 2029 of these 2012 were abated, leaving 15 in hand at the close of the year.

At the close of the year 1907, there were 30 nuisances in hand all of which have been since remedied.

There were 15 legal notices served during 1908, for the abatement of nuisances. There were no summonses or other legal proceedings.

From the list of notices I find that the chief were:—

)	abolish	defective privies		* * *		68
	"	ashpits		* * *		37
	,,	manure pits		* * *		2
	Provide	new water closets	• • •			66
	"	ashpits		* *	•••	29
	,,	galvanised iron recept	ables	• • •		35
	"	trapped gullies to unt	rapped d	lrains		60
	Disconn	ect house sink waste p	ipes fron	n drains		27
	Remove	gullies and drains from	m inside	houses		16
	Cleanse	and repair water close	ts	• • •	• • •	82
	Provide	water supply to closet	s	• • •	• • •	7
	Cleanse	dirty floors and seats t	to water	closets		45
	Limewa	sh walls and ceiling to	closets	* * •		39
	Cleanse	ceilings, walls, floors a	nd staire	eases to he	ouses	8
	Abate n	uisance from overcrow	ding	• • •		4
	Cleanse	and repair drain	• • •			84
	Provide	dishstones with loose g	grates			74

Properly fix dishstones to gullies	441
Make sink waste-pipes discharge on top of tra	apped
gulley	59
Abolish defective urinal	1
Provide new urinal	2
Remove animals improperly kept	53
Remove fowl houses, rabbit hutches, pigeon cot	es 11
Remove foul brickwork and soil from privies	68
" ashpits	37
Flag, pave or ashphalt yard to houses	155
Provide earth closets	8
Provide more efficient light and ventilation	16
Prevent smoke nuisance	3
Make premises fit for habitation	1

In the above list you will see that there have been many notices served to properly fix dishstones to gullies. In these cases instead of the gulley having been brought up to the dishstone, there have been several courses of brickwork between the two, as a result waste liquids have percolated between the defective brickwork joints causing contamination of the surrounding soil and of the basement walls, in many cases causing damp cellar walls. This form of nuisance has been due to defective construction.

FLAGGING, ASPHALTING, CONCRETING, OR STONE SETT PAVING OF FORECOURTS, BACKYARDS, AND PASSAGE WAYS TO HOUSES.

I have advocated this work since my appointment as M.O.H. In April last, on your instructions, it was commenced, and the following work has been done at 519 houses:—

Stone Sett Paving			1327 sq. yds.
Flagging			729 ,,
Asphalting			5920 ,,
Concreting		• • •	37 ,,
	Total		8013 ,,

This is, undoubtedly, a great Sanitary Improvement, the work done rendering the previous insanitary, wet and foul surfaces of the yards and walls impervious to ground saturation. It has also been conducive to greater cleanliness on the part of the occupiers.

Great credit is due to the owners of property who have at great expense made these improvements, and without opposition carried out your requirements. In almost all cases the class of work has been good, in a very few however, I should like to have seen better, the necessity for repairing would then have been more remote.

This work is being and will be continued. I would ask that effectual paving or asphalting on the precints of new property be procured without the Intervention of the Sanitary Inspector. If not, it means work for this department which ought not to be necessary, and again property owners do not like to spend money in this way a few years after the erection of houses.

SEWAGE AND SEWAGE DISPOSAL.—Excremental disposal is almost entirely on the water carriage system. There are some pail closets which are emptied weekly, and also some privies. It is on the low side of Dewsbury Moor that practically all the few privies exist. They cannot be converted into water closets on account of the inaccessibility of the sewer. A few years ago there was a scheme considered for the more effectual drainage of this part of the Borough. I advise that this subject be again considered. With the above-mentioned exception, the district is systematically sewered, rainfall from roads being excluded.

Sewage is disposed of on the Corporation Sewage Farm at Mitchell Laithes. The system adopted is intermittent downward filtration. The Farm is situated in a sparsely populated locality, and there have been no complaints from the neighbourhood. The effluent has been satisfactory to the West Riding Rivers Board. The Amalgamation Enquiry held in the early part of the year, brought forward the fact that modern means of dealing with sewage on the Sewage Farm will have to be adopted in event of any increase of sewage to be treated.

Household refuse is removed by the Corporation staff, and under the supervision of the Borough Surveyor. Ashbins are emptied weekly, and the dry ashpits once in three weeks. In addition a daily collection is made from shop premises. Refuse is disposed of in the Corporation destructor.

THE PUBLIC HEALTH ACTS AMENDMENT ACT, 1907.

The Sanitary Committee have had under consideration the expediency of adopting many of the sections of the Public Health

Acts Amendment Act, 1907, but after informal communication with the Local Government Board, they have decided to defer the further consideration of adopting any of the provisions of the Act pending the settlement of the question of extension of boundaries.

DWELLINGS.—There have been 39 new houses built during the year all being through dwelling-houses and accord with the Bye-Laws.

As new houses are erected they are rapidly tenanted. This must not be taken that there is a dearth of houses. People prefer new houses as they are cleaner and answer the modern requirements of comfort and hygiene. No back-to-back houses have been built since the Bye-laws prohibited their erection in 1888, but unfortunately a large number exist.

One house has been closed as I reported it to be unfit for human habitation.

In March, 1908, Dr. Mair, a Local Government Board Inspector visited Dewsbury to obtain information on the "backto-back" house question. He was making enquiries on this subject in many towns, and I shall be interested to see his report when published. At the expense of much time I prepared certain comparative statistics for him. 'After going over the Borough we decided to take groups of houses on both sides of a certain length of Ashworth Road; those at one side being through houses, and those on the opposite side being back-to-back houses. It is not a slum part, and the occupants are all most respectable. obtained from the Registrar particulars of all deaths occurring in all the houses named for the years, viz:-from 1898 to 1907 inclusive, and also the number of births. A census of each house was taken and on this population the vital statistics were calculated. The rates also were calculated for all the age periods, these however I do not give you, but the following table shows the chief figures:—

	on.	Tota	l numbe in 10 g	er of I years.	Deaths,	Deat	rage Ar di Rate per 1,00	from	of Births.	of Deaths year.	Annual eath Rate
HOUSES.	Population	All Causes.	7 Principal Zvmotic Diseases.	Consumption.	Other Tubercular Diseases.	All Causes.	7 Zymotic Diseases.	All forms of Tuberculosis.	Total number of	Total number under 1 y	Average A Infantile Dec per 1,000
Through	180	28	3	6	1	15.55	1.66	3.88	24	1	41.6
Back-to-Back	210	4 3	8	2	2	20.47	3.8	1.9	70	13	185

It would have been better if a much longer period had been taken, or a larger number of each type of house.

Overcrowding, the occupants in each case complied with the notice. Taking the Registrar General's standard for over crowding—over two persons per room in each tenement, then over-crowding in a more or less degree exists. It is a condition difficult to deal with, especially in cases where the the wages are small and the family large, examples of which all we medical men in a manufacturing town come across. There are on the other hand cases where the combined earnings of several members of the family make it possible for them to spend more in house rent and therefore have better accommodation. Perhaps they have lived in the same house for many years, and although the family has grown they have not realized the advisability and in some cases the necessity of obtaining increased room.

In connection with the Housing (Town Planning, etc.) Bill, a clause had been added which required all Local Authorities to inspect and survey all dwelling-houses inhabited by persons of the working-class (as defined by the Bill and by section 75 of the Housing of the Working Classes Act, 1890), and to keep a Register with certain particulars, which I will not mention. The Register to be revised every five years, I understand the clause has been withdrawn. I personally think such inspection would be beneficial. Some authorities carry out house-to-house inspection systemically. We do not and of course cannot with the present staff. I believe if it were carried out it would to a large extent prevent both overcrowding and dirt. I ask you to consider the question.

FACTORY AND WORKSHOPS.—There are 130 Factories and 23 Workshops on the Register.

The Workshops comprise the following:

Workshop Ba	akehouses	• • •	• • •	• • •	16
Rag-Sorting					57
Boot and Clo	g Repairin	g			27
Joinery and	Cabinet-ma	ıking			19
Hand-Loom	Weaving	• • •			6
Millinery				• • •	28
Tailoring					12
Others		• • •		• • •	69
				_	
				4	234

The inspections made, have been:—

	1	Inspections.	Written Notices.	Prosecutions.
Factories Workshops	• • •	23 164	12 49	0
Totals	• • •	187	61	0

The number of defects found and remedied have been as follows:—

	Found.	Remedied.
Dirty walls, ceilings, passage-ways, and stair-cases Want of ventilation Sanitary (Insufficient Unsuitable or defective Not having proper receptable for refuse Use such means as will prevent dust being blown on the streets	22 2 1 17 4 3	22 2 1 15 4 3
Totals	50	48

^{*} This has been put under the "remedied" column," as means have been taken, but I have recently found that it is not yet satisfactory as dust escapes.

The two unremedied conditions are in hand:—

Eleven privies have been abolished, seven water closets and four earth closets have been provided. In five cases the water closets have not been sufficiently separated from the work-rooms. Attention is being paid to the intervening ventilating space.

Section 22 of the Public Health Acts, (Amendment Act), 1890, is in force in the District, the standard adopted being one closet for every 20 persons, and separate ones for the two sexes.

In my report for 1907, I mentioned with respect to the escape of dust, that there were two still under observation. In one case means have been taken for remedying the nuisance, and in the other case the works have been closed, in this last case proceedings were taken against the firm by the Inspector under the "Alkali Acts," I gave evidence in this case and a verdict was given against the firm, a penalty being imposed.

Complaints have been made from residents in a certain street of foul smells arising from the manhole in the sewer and attributing the nuisance to what was being discharged into the sewer from a certain dyehouse. Inspections were made by the Borough Surveyor, the Sanitary Inspector and myself, as reported to you we were of opinion that the nuisance was due to liquid being discharged from the said works into the sewer at a temperature of 212° C. (boiling point) or thereabouts. There has been suspicions also that hot liquid has been discharged into a sewer from a tripe boiling place, causing disagreeble smells from a manhole near. Section 17, Part iii, of the Public Health Acts (Amendment Act), 1890, which prohibits liquids at a temperature above 110° F. being discharged into the sewers is not sufficiently well known and observed.

Home Work Order.—Enquiries have been made respecting this order at a few firms, where I thought Home work would be given out, I find this is not the case.

Only one list has been sent in, and this does not really apply as the place of work (a small boot repairing shop) is itself a registered workshop, and the abstract of the Factory and Workshop Act is affixed.

LOCAL GOVERNMENT BOARD TABLES.

TABLE T.

DEWSBURY M.B. Vital Statistics of Whole District during 1908 and previous years.

				TI.4-21 T	Domet	T off in the D	striot		Theothead	Therefore	Nett Deaths at all	ths at all
		Births	S	Total	Total Deaths registered in the Distinct.	rea in pile	ISUICO.	Total	Deaths of Non-	Deaths of Residents	Ages belonging to the	ing to the
Vear	Population Estimated			Under 1 Ye	Year of Age.	At all	all Ages.	Deaths in Public	Residents registered	registered in Public	Dist	rict.
	to Middle of each Year.	Number.	Rate.*	Number.	Rate per 1000 Births registered.	Number,	Rate.*	Institutions in the District.	in Public Institutions in the District.	Institutions beyond the District.	Number.	Rate.*
ï	ci	က်	4.	5.	.9	7.	8.	9.	10.	Ť	12.	13.
1000	36200	707	7.10	195	1	661	6.86	13.9	87		574	20.1
0801	7007	1 0	9.80		991	591	6.03	131	22			18.1
1900		6.55 5.55 5.55	23.3	154	231	642	23.8	113	∞ ∞	•	554	19.7
	28017	689	5+6	122	177	626	22.4	133	73	5	562	20.1
606		685	2.2.8	87	137	569	20.4	139	7.4	6	504	18.1
806	97673	660	23.8	124	187	595	21.5	156	81	7	527	19.0
1904		671	24.39		168	675	22.5	239	119	14	270	2 .72
905		653	23.89	126	192	809	22.2	173	102	16	522	60.61
	7.6	689	23.44	109	170	580	21.8	169	66	91	497	18.23
1907	2711	592	21.83	94	158	595	21.94	176	115	12	492	18·14
Averages for years 1898-1907	27780	929	23.63	116	176	614	22.0	156	5	35	531	19.12
1908	26987	592	21.93	86	. 165	595	50.73	185	100+	.50	513	19.0
	7	A	0	J 19 solvilor	100 L mon Po-	and 13 raturated now 1 000 of actimated mornilation	d nonniation		+2 dvino in the street	street		

Area of District in acres (exclusive of area covered by water) *Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

... 28,060. ... 6,642. 4·2. Total population at all ages at Census of 1901 Number of inhabited houses do. do. Average number of persons per house,

I. Institutions within the District receiving sick and infirm persons from outside the District.	II. Institutions outside the District receiving sick and infirm persons from the District.	Other Institutions, the deaths in which have been distributed among the several localities in the District.
Dewsbury Union Work- house. Dewsbury and District General Infirmary.	Dewsbury Joint Hospital Board's Isolation Hospital. The West Riding Asylums.	Leeds General Infirmary. Bradford Eye and Ear Hospital.

Vital Statistics in 1908 and previous years.

Dewsbury M.B.

Year.	Population estimated to middle of each Year.	Births registered.	Deaths at all Ages.	Deaths under One Year.
1898 1899 1900 1901 1902 1903 1904 1905 1906 1907	28526 28353 28180 28017 27844 27673 27502 27333 27255 27118	705 670 655 689 635 660 671 653 639 592	574 514 554 562 504 527 570 522 497 492	125 111 154 122 87 124 111 126 109 94
Averages of years 1898-1907	27780	656	531	116
1908 ,	26987	592	513	98

TABLE III.

Cases of Infectious Disease notified during the year 1908. Dewsbury M.B.

			Cases 1	Notifie	l in W	hole D	istrict.		Jases Hospital District.
Notifiable Disease.		At		A	t Ages	—Year	`S.) 00 e
		all Ages.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards	No. of Removed to from Whol
Small-pox		1					1		1
Cholera								• •	^
Diphtheria (includin	or	• •	•••	• • •	• • •	• • •		* * *	
Membranous Croup		11	1	3	4	1	2		6
Thursday also		7				1	6	1	
0 1 773		26	1	7	16	2	1		20
Typhus Fever									
77 77		30	1	2	1	8	10		20
T) 1 ' T)								1	
Continued Fever						,			
Description Torrer		1				1			
Plague	!								
							• • •		
Totals	!	76	1	12	30	13	20		47
		•							

Isolation Hospital—Name and Situation—

Dewsbury Joint Hospital Board, situate in Soothill Nether.

Total available beds, 70.

Number of diseases that can be concurrently treated, 3.

Dewsbury Joint Hospital Board's Small Pox Hospital, in Ossett.

Total available beds, 50.

Number of diseases that can be concurrently treated, 1.

TABLE IV.

Causes of, and Ages at, Death, during year 1908. Dewsbury M.B.

	(6	Death Reside	nts" v	vhethe	joined r oecur Distriet	ring ir	f 1 or	ths whether of "Non-Residents" Institutions in District.
Causes of Death.	All ages.	Under 1 year.	1 and under \tilde{b} .	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Total Deaths whether Residents or "Non-Residin Public Institutions the District.
Small-pox	1		• •		• • •	1	• • •	
Measles		2	2	1				
Scarlet Fever			2		1		• • •	
Whooping Cough	6	-1	2	• • •			• • •	
Diphtheria (including Membranous Croup)	1		1					
Croup								
Typhus								
Fever Enteric	5			2	2	1		
Other continued	1							
Epidemic Influenza	12		i		1	5	5	• • •
Cholera Plague	• • •			• • •	* * •			
Diounhose	28	18	6			2	2	
Entopitic	8	4	2	1	1			
Puerperal Fever								
Erysipelas								
Other Septic Diseases								
Phthisis (Pulmonary Tuber-								
culosis)]	3	3	11	23	2	12
Other Tubercular Diseases		1	8	4	2	7		6
Cancer, Malignant Disease					2	14	9	9
Bronchitis	1	7	3	5	• • •	15	19	14 11
Pneumonia		13	11		1	$\frac{16}{1}$	8	
Pleurisy Other Diseases of Respiratory	2	• • •	• • •	• • •	• • •	1	1	• • •
Organs	3					2	1	
Alcoholism, Cirrhosis of Liver	2	• • •				$\frac{2}{2}$		1
Venereal Diseases			• • •			_		
Premature Birth	8	8	• •					
Diseases and Accidents of								
Parturition	3			• • •	1	2		
Heart Diseases		• • •		1		28	9	2)
Accidents	11		3	1		4	3	18
Suicides	102	40	13	4	7	1	5.0	0.4
All other causes	183	40	6.1	' t	- 4	60	5 9	94
All course	519	98	57	0.2	() ()	104	1.10	105
All causes	513	90	01	23	33	184	118	185

TABLE V.

Infantile Mortality during the year 1908.

Deaths from stated Causes in Weeks and Months under One Year of Age.

C	Cause or Death.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3.4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under 1 Year.
All Causes. {	Certified Uncertified	11 1	2	4	3	21	10 	13	9	14	8	6	4	1	3	5	4	97 1
Common Infectious Diseases.	Small-pox	•••				The state of the s	 1 	 1 2		1	 1				•••	• • • • • • • • • • • • • • • • • • • •		 1 2 4
Diarrhœal Diseases.	Diarrhea, all forms Enteritis, Muco-enteritis, Gastro-enteritis Gastritis, Gastro-Intestinal Catarrh				****			3 	1	4	3	5 	1	1	1	1 2 		18 4
Wasting Diseases.	Premature Birth Congenital Defects Injury at Birth Want of Breast Milk, Starvation Atrophy, Debility Marasmus	7 1 	1	1 	1	7 3 	1 1 5	 1	 1			•••				•••	800	8 4 2
Tuber- culous Diseases.	Tuberculous Meningitis Tuberculous Peritonitis: Tabes Mesenterica Other Tuberculous Diseases	• • • •			•••				•••	1								1 1
Other Causes.	Erysipelas Syphilis Rickets Meningitis (not Tuberculous) Convulsions	 2		 1					1	1	1	•••				 1 	 1 1	 3 2 7
Other	Bronchitis Laryngitis Pneumonia Suffocation, overlaying Other Causes	··· ··· 1	1		1	1 3	1 	1 2 1	3	3 1	1 1 	i i 	3		1	•••	1 1 	7 13 5
	Totals	12	2	4	3	21	10	13	9	14	8	6	4	1	3	5	4	98

District (or sub-division) of Dewsbury.

Population (estimated to the middle of 1908) 26,987.

Births in the year { legitimate 542. legitimate 50. Deaths in the year of { legitimate infants 89 illegitimate infants 9

Deaths from all causes at all ages, 513.